107TH CONGRESS 2D SESSION

S. 1931

To amend title XVIII of the Social Security Act to improve patient access to, and utilization of, the colorectal cancer screening benefit under the medicare program.

IN THE SENATE OF THE UNITED STATES

February 11, 2002

Mr. Lieberman (for himself, Ms. Collins, Mr. Torricelli, Ms. Snowe, and Mr. Cochran) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend title XVIII of the Social Security Act to improve patient access to, and utilization of, the colorectal cancer screening benefit under the medicare program.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE.
- 4 This Act may be cited as the "Colon Cancer Screen
- 5 for Life Act of 2002".
- 6 SEC. 2. SENSE OF CONGRESS.
- 7 It is the sense of Congress that—
- 8 (1) colorectal cancer screening tests (as defined
- 9 in section 1861(pp) of the Social Security Act (42

- U.S.C. 1395x(pp)) covered under the medicare program have been severely underutilized, with the Comptroller General of the United States reporting in 2000 that since coverage of such tests was implemented, the percentage of beneficiaries under the medicare program receiving either a screening or a diagnostic colonoscopy has increased by only 1 percent;
 - (2) the Centers for Medicare & Medicaid Services should encourage health care providers to use more effective screening and diagnostic health care technologies in the area of colorectal cancer screening;
 - (3) in recent years, the Centers for Medicare & Medicaid Services has subjected colorectal cancer screening tests to some of the largest reimbursement reductions under the medicare program;
 - (4) unlike other preventive screening tests covered under the medicare program, health care providers must consult with beneficiaries prior to furnishing a screening colonoscopy in order to—
- 22 (A) ascertain the medical and family his-23 tory of the beneficiary; and

1	(B) inform the beneficiary of preparatory
2	steps that must be taken prior to the procedure;
3	and
4	(5) reimbursement under the medicare program
5	is not currently available for the consultations de-
6	scribed in paragraph (4) despite the fact that reim-
7	bursement is provided under such program for simi-
8	lar consultations prior to a diagnostic colonoscopy.
9	SEC. 3. INCREASE IN REIMBURSEMENT FOR COLORECTAL
10	CANCER SCREENING AND DIAGNOSTIC
11	TESTS.
12	(a) In General.—Section 1834(d) of the Social Se-
13	curity Act (42 U.S.C. 1395m(d)) is amended by adding
14	at the end the following new paragraph:
15	"(4) Enhanced payment for colorectal
16	CANCER SCREENING AND DIAGNOSTIC TESTS.—
17	"(A) Nonfacility rates.—Notwith-
18	standing paragraphs (2)(A) and (3)(A), the
19	Secretary shall establish national minimum pay-
20	ment amounts for CPT codes 45330, 45378,
21	45380, 45385 and HCPCS codes GO104,
22	GO105, GO106, GO107, GO120, and GO121
23	for items and services furnished during the last
24	6 months of 2002 and in subsequent years
25	which reflect a 10 percent increase above the

relative value units in effect as the nonfacility rates for such codes in 2001, with such revised payment level to apply to items and services performed in a nonfacility setting, provided, however, that such setting is consistent with quality care, sound medical judgment, and prevention of potential complications.

"(B) Facility rates.—Notwithstanding paragraphs (2)(A) and (3)(A), the Secretary shall establish national minimum payment amounts for CPT codes 45330, 45378, 45380, 45385 and HCPCS codes GO104, GO105, GO106, GO107, GO120, and GO121 for items and services furnished during the last 6 months of 2002 and in subsequent years which reflect a 30 percent increase above the relative value units in effect as the facility rates for such codes in 2001, with such revised payment level to apply to items and services performed in a facility setting.

"(C) Annual adjustments.—In the case of items and services furnished on or after January 1, 2003, the payment rates described in subparagraphs (A) and (B) shall, subject to the minimum payment amounts established in such

1	subparagraphs, be adjusted annually as pro-
2	vided in section 1848.".
3	(b) Effective Date.—The amendment made by
4	this section shall apply to items and services furnished on
5	or after July 1, 2002.
6	SEC. 4. MEDICARE COVERAGE OF OFFICE VISIT OR CON-
7	SULTATION PRIOR TO A SCREENING
8	COLONOSCOPY OR IN CONJUNCTION WITH A
9	BENEFICIARY'S DECISION TO OBTAIN SUCH A
10	SCREENING.
11	(a) Coverage.—Section 1861(s)(2) of the Social Se-
12	curity Act (42 U.S.C. 1395x(s)(2)) is amended—
13	(1) in subparagraph (U), by striking "and" at
14	the end;
15	(2) in subparagraph (V), by inserting "and" at
16	the end; and
17	(3) by adding at the end the following new sub-
18	paragraph:
19	"(W) an outpatient office visit or consultation
20	for the purpose of beneficiary education, assuring se-
21	lection of the proper screening test, and securing in-
22	formation relating to the procedure and sedation of
23	the beneficiary, prior to a colorectal cancer screening
24	test consisting of a screening colonoscopy or in con-
25	iunction with the beneficiary's decision to obtain

1 such a screening, regardless of whether such screen-2 ing is medically indicated with respect to the beneficiary;". 3 4 (b) Payment.— (1) IN GENERAL.—Section 1833(a)(1) of the 5 Social Security Act (42 U.S.C. 1395l(a)(1)) is 6 7 amended— (A) by striking "and" before "(U)"; and 8 9 (B) by inserting before the semicolon at the end the following: ", and (V) with respect 10 11 to an outpatient office visit or consultation 12 under section 1861(s)(2)(W), the amounts paid 13 shall be 80 percent of the lesser of the actual 14 charge or the amount established under section 15 1848". 16 (2) Payment under physician fee sched-17 ULE.—Section 1848(j)(3) of the Social Security Act 18 (42 U.S.C. 1395w-4(j)(3)) is amended by inserting 19 "(2)(W)," after "(2)(S),". 20 (3) Requirement for establishment of 21 PAYMENT AMOUNT UNDER PHYSICIAN FEE SCHED-22 ULE.—Section 1834(d) of the Social Security Act 23 (42 U.S.C. 1395m(d)), as amended by section 3, is 24 amended by adding at the end the following new

paragraph:

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1	"(5) Payment for outpatient office visit
2	OR CONSULTATION PRIOR TO SCREENING
3	COLONOSCOPY.—With respect to an outpatient office
4	visit or consultation under section 1861(s)(2)(W)
5	payment under section 1848 shall be consistent with
6	the payment amounts for CPT codes 99203 and
7	99243.".
8	(c) Effective Date.—The amendments made by
9	this section shall apply to items and services provided or
10	or after July 1, 2002.
11	SEC. 5. WAIVER OF DEDUCTIBLE FOR COLORECTAL CAN
12	CER SCREENING TESTS.
13	(a) In General.—The first sentence of section
14	1833(b) of the Social Security Act (42 U.S.C. 1395l(b))
15	is amended—
16	(1) by striking "and" before "(6)"; and
17	(2) by inserting before the period at the end the
18	following: ", and (7) such deductible shall not apply
19	with respect to colorectal cancer screening tests (as
20	described in section $1861(pp)(1)$ ".
21	(b) Conforming Amendments.—Paragraphs
22	(2)(C)(ii) and (3)(C)(ii) of section 1834(d) of the Social
23	Security Act (42 U.S.C. 1395m(d)) are each amended—
24	(1) by striking "DEDUCTIBLE AND" in the
25	heading; and

- 1 (2) in subclause (I), by striking "deductible or"
- 2 each place it appears.
- 3 (c) Effective Date.—The amendment made by
- 4 this section shall apply to items and services furnished on

5 or after July 1, 2002.

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